

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Applicant: Barry L. Reed et al.

Title: DERMAL PENETRATION  
ENHANCERS AND DRUG DELIVERY  
SYSTEMS INVOLVING SAME

Appl. No.: 09/910,780

Filing Date: 7/24/2001

Examiner: K.M. George

Art Unit: 1616

AMENDMENT TRANSMITTAL

Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ Amendment and Reply under 37 CFR 1.111.

☒ Terminal Disclaimer

☒ Information Disclosure Statement, PTO-SB08 including 11 References

☒ The fee required for additional claims is calculated below:

Claims As Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
20	- 20 =	0 x	\$18.00 =	\$0.00
3	- 3 =	0 x	\$86.00 =	\$0.00
First presentation of any Multiple Dependent Claims: + \$290.00 =				\$0.00
CLAIMS FEE TOTAL =				\$0.00

12/12/2003 GW0000067 09910780

01 FC:1252

420.00 OP

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input type="checkbox"/> Extension for response filed within the first month:	\$110.00	\$0.00
<input checked="" type="checkbox"/> Extension for response filed within the second month:	\$420.00	\$420.00
<input type="checkbox"/> Extension for response filed within the third month:	\$950.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,480.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,010.00	\$0.00
EXTENSION FEE TOTAL:		\$420.00
<input checked="" type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$110.00	\$110.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$530.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):		\$0.00
TOTAL FEE:		\$530.00

☒ A check in the amount of \$530.00 is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 11 December 2003

By Stephen A. Bent

FOLEY & LARDNER  
Customer Number: 22428  
Telephone: (202) 672-5404  
Facsimile: (202) 672-5399

Stephen A. Bent  
Attorney for Applicant  
Registration No. 29,768